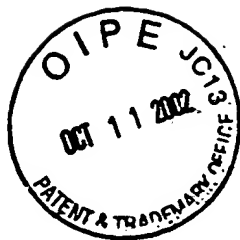


CERTIFICATE OF MAILING

I hereby certify that this paper and every paper referred to therein as being enclosed is being deposited with the U.S. Postal Service as first class mail, postage prepaid, in an envelope addressed to: Hon. Commissioner for Patents, Washington, DC 20231.



#3/tbs
ant
10/16/02



27662

PATENT TRADEMARK OFFICE

on October 5, 2002 (Date of Deposit)

By Craig S. Fischer
Signature

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PATENT
Attorney Docket No: MCS-071-00
Microsoft No. 158341.1

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the Application of: RUI et al.

Serial No.: 09/681,843

Group Art Unit: 2643

Filed: June 14, 2001

Examiner: G. Eng

For: **AUTOMATED ONLINE BROADCASTING SYSTEM AND
METHOD USING AN OMNI-DIRECTIONAL CAMERA
SYSTEM FOR VIEWING MEETINGS OVER A COMPUTER NETWORK**

AMENDMENT UNDER 37 C.F.R. 1.111

Hon. Commissioner for Patents
Washington, DC 20231

Sir:

In response to the Office Action dated July 5, 2002, please amend the above-identified patent application as set forth below.

10/15/2002 EHAILE1 00000028 09681843

01 FC:103

72.00 DP

AMENDMENT TRANSMITTAL LETTER (Large Entity)

Applicant(s): RUI et al.

Docket No.
MCS-071-00Serial No.
09/681,843Filing Date
06/14/2001Examiner
G. EngGroup Art Unit
2643Invention: AUTOMATED ONLINE BROADCASTING SYSTEM AND METHOD USING AN
OMNI-DIRECTIONAL CAMERA SYSTEM FOR VIEWING MEETINGS OVER A
COMPUTER NETWORK**RECEIVED**

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TO THE HON. COMMISSIONER FOR PATENTS:

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Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated and is transmitted as shown below.

CLAIMS AS AMENDED

| | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST # PREV. PAID FOR | NUMBER EXTRA CLAIMS PRESENT | RATE | ADDITIONAL FEE |
|--|-------------------------------------|-----------------------------|--------------------------------|---------|-------------------|
| TOTAL CLAIMS | 28 - | 24 = | 4 x | \$18.00 | \$72.00 |
| INDEP. CLAIMS | 4 - | 4 = | 0 x | \$84.00 | \$ 0.00 |
| Multiple Dependent Claims (check if applicable) <input type="checkbox"/> | | | | | \$ 0.00 |
| TOTAL ADDITIONAL FEE FOR THIS AMENDMENT | | | | | \$ 72.00 |

- ☐ No additional fee is required for amendment.
- ☐ Please charge Deposit Account No. _____ in the amount of _____
A duplicate copy of this sheet is enclosed.
- ☐ A check in the amount of _____ to cover the filing fee is enclosed.
- ☒ A Credit Card Payment Form (PTO-2038) for payment for additional claims in the amount of \$72.00 is attached.

Signature

Dated: October 5, 2002

Craig S. Fischer
Reg. No. 42,535
LYON & HARR, L.L.P.
300 East Esplanade Drive
Suite 800
Oxnard, CA 93036-1274
Tel: (805) 278-8855
Fax: (805) 278-8064

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